### **HOUSE OF REPRESENTATIVES STAFF ANALYSIS**

BILL #: HB 189

Nursing/Geriatric Specialty

**SPONSOR(S)**: Farkas **TIED BILLS:** None.

IDEN./SIM. BILLS: CS/SB 492 (s)

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Health Care	21 Y, 1 N	Mitchell	Collins
2) Future of Florida's Families		Meyer	Liem
3) Appropriations			
4)			
5)			

#### **SUMMARY ANALYSIS**

### The bill:

- Creates a new licensure category of certified geriatric specialist to work in nursing homes;
- Establishes a pilot training program for certified nurse assistants working in nursing homes at two sites.
- Requires the Agency for Workforce Innovation (AWI) to establish a pilot training program to deliver geriatric nursing education in two nursing homes.
- Appropriates \$157,017 for the pilot, and requires a nine member committee and evaluation and status reports
- Revises eligibility for the Medical Education Reimbursement and Loan Repayment Program and the Nursing Student Loan Forgiveness Program to include certified geriatric specialists.

The Agency for Workforce Innovation projects training costs over the three years of the pilot project are \$521,571. The Department of Health projects recurring licensure costs over a two year cycle are \$99,895.

The effective date of the bill is upon becoming law.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives. STORAGE NAME: h0189.fff.doc March 11, 2004

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### **FULL ANALYSIS**

### I. SUBSTANTIVE ANALYSIS

## A. DOES THE BILL:

1.	Reduce government?	Yes[]	No[X]	N/A[]
2.	Lower taxes?	Yes[]	No[X]	N/A[]
3.	Expand individual freedom?	Yes[]	No[]	N/A[X]
4.	Increase personal responsibility?	Yes[]	No[]	N/A[X]
5.	Empower families?	Yes[]	No[]	N/A[X]

For any principle that received a "no" above, please explain:

#### Reduce government:

The bill establishes the new category of licensure of certified geriatric specialist.

### Lower taxes:

Fees are required for certified geriatric specialists. The application fee shall not exceed \$100 and the renewal fee shall not exceed \$50.

### B. EFFECT OF PROPOSED CHANGES:

The bill requires the Agency for Workforce Innovation (AWI) to establish a pilot program to train certified nursing assistants (CNAs) who wish to receive advanced training in care of the elderly. This training is based on the course of study required for licensed practical nurses but excludes training in pediatrics. obstetrics, and maternal/child health.

The bill specifies that two nursing homes that meet specified quality standards offer the pilot training program. The bill limits the training to certified nursing assistants who have worked in one of the participating nursing homes for at least one year and who have a high school diploma or its equivalent. The training must be approved as provided in section 464.019, F.S., and offered in coordination with the CNAs work schedule.

The bill creates a steering committee to guide the implementation of the pilot program. That committee includes:

The Chair of the Board of Nursing or his or her designee; a representative of: AWI, Workforce Innovation, Workforce Florida, Inc, the Departments of Education, Health, Elder Affairs a Gold Seal nursing home that is not one of the pilot sites, the Agency for Health Care Administration, and the Executive Director Florida Center for Nursing.

The steering committee is entitled to receive reimbursement for travel and per diem. The steering committee is to complete its work by June 30, 2007 and its authorization ends on that date. AWI must evaluate the pilot with help from the steering committee and submit reports.

The bill creates a new section of statute, 464.0215 "Certification requirements". This section defines the "practice of certified geriatric specialty nursing" and in so doing limits it to selected acts performed only in facilities licensed pursuant to Part II or Part III of chapter 400; that is nursing homes or assisted living facilities. The bill delineates requirements for applicants. The bill requires that applicants complete the requirement for graduation from an approved program "for nursing or its equivalent, as determined by the board, for the preparation of licensed practical nurses, except for instruction and clinical knowledge of pediatric nursing or obstetric/maternal-child nursing."

Any program that is approved by the Board of Nursing on July 1, 2004 does not require further board approval. Students must demonstrate proficiency in English. The bill limits where and what the

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certified geriatric specialist may do. Specifically the scope of practice includes: the administration of treatments and medications in the care of ill, injured, or infirm geriatric patients and the promotion of wellness, maintenance of health, and prevention of illness of geriatric patients. Certified geriatric specialty nurses are required to practice under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist. A certified geriatric specialist may supervise the activities of CNAs and other unlicensed personnel providing services in nursing homes and related facilities in accordance with rules to be adopted by the Board of Nursing.

The bill defines the practice of current certified nursing assistants as: "...providing care and assisting persons with tasks relating to the activities of daily living. Such tasks are those associated with personal care, maintaining mobility, nutrition and hydration, toileting and elimination, assistive devices, safety and cleanliness, data gathering, reporting abnormal signs and symptoms, postmortem care, patient socialization and reality orientation, end-of-life care, cardiopulmonary resuscitation and emergency care, residents' or patients' rights...."

A person receiving certification as a geriatric specialist must:

- 1. Work only within the confines of a facility licensed under part II or part III of chapter 400, F.S.
- 2. Care for geriatric patients only.
- 3. Comply with the minimum standards of practice for nurses and be subject to disciplinary action for violations of s. 464.018, F.S.

In addition the bill also requires that any certified geriatric specialist who completes the additional instruction and coursework in an approved nursing program for the preparation of practical nursing in the areas of pediatric nursing and obstetric/maternal-child nursing, is entitled to be licensed as a licensed practical nurse if the applicant otherwise meets the requirements of s. 464.008, F.S., including passing a licensure examination.

The board must establish an application fee not to exceed \$100 and a biennial renewal fee not to exceed \$50.

The bill revises eligibility for Medical Education Reimbursement and Loan Repayment Program and the Nursing Student Loan Forgiveness Program to include certified geriatric specialists.

The bill appropriates \$157,017 to the Agency for Workforce Innovation to support implementation of the pilot program.

The effective date of the bill is upon becoming law.

### **CURRENT SITUATION**

# Scope of Practice in Nursing: Registered Nurses, Licensed Practical Nurses and Certified **Nursing Assistants**

Part I, ch. 464, F.S., provides for the regulation of nursing. It provides for three levels of licensure and certification: registered nurses (RNs); licensed practical nurses (LPNs); and certified nursing assistants (CNAs).

- Registered nurses (RNs) provide nursing assessment and care, and administer medications and treatments as prescribed or authorized by a duly licensed practitioner. They supervise other personnel.
- Licensed practical nurses (LPNs) administer treatments and medications under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist.

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Certified Nurse Assistants (CNAs) provide care and assistance to persons relating to the activities of daily living.

## **Licensure Requirements for Licensed Practical Nurses in Florida**

To become licensed as a practical nurse in Florida, an applicant must pass a national licensing examination developed by the National Council of State Boards of Nursing (NCSBN) or a similar national organization.

To sit for the examination in Florida, an applicant must complete an application and pay the Florida Department of Health fees totaling \$180, which includes the following fees: \$75 initial licensure fee; \$75 examination fee; \$5 unlicensed activity fee; \$5 Nursing Student Loan Forgiveness Fund fee; and \$20 fingerprint/criminal background fee (includes \$5 for administrative costs).

The applicant must provide sufficient information for a statewide criminal records correspondence check through the Florida Department of Law Enforcement; be in good mental and physical health; have a high school diploma or the equivalent; have completed the requirements of a Florida Board of Nursing approved nursing program for licensed practical nurses or the practical nursing education equivalency; and have the ability to communicate in English.

Once the Florida Board of Nursing has certified an applicant to take the examination, the applicant must submit a letter of authorization from the board and pay \$200 to the NCSBN examination vendor to sit for the computerized national nursing examination (NCLEX-PN). An applicant is eligible to sit for the license examination up to three consecutive times.

The 1350-hour curriculum for practical nursing is offered in 61 board-approved schools around the state. In the year ending June 30, 2002, there were 3,527 admissions to practical nursing programs into 4,349 slots approved by the board, or 81% capacity. In 2002-2003, the board approved 8 new practical nursing schools with additional capacity of over 500 students. During the same period, there were a total of 2,074 graduates of practical nursing programs in Florida.

## Requirements for Certification as a "Certified Nursing Assistant" in Florida

Part II, ch. 464, F.S., provides for the regulation of certified nursing assistants by the Florida Board of Nursing. The Florida Department of Education was responsible for approving nursing assistant training programs until the Florida Board of Nursing assumed that responsibility on October 1, 2000.

The Florida Board of Nursing must issue a certificate to any person who demonstrates minimum competency to read and write and successfully passes the required Level I or Level II criminal background screening required under s. 400.215, F.S., and meets one of the following criteria:

- 1. Successful completion of an approved training program and achievement of a minimum score on the nursing assistant competency examination;
- 2. Achievement of a minimum score on the nursing assistant competency examination by an applicant who has a high school diploma or its equivalent or who is at least 18 years old;
- 3. Current certification in another state; or
- 4. Completion of the curriculum under the Enterprise Florida Jobs and Education Partnership Grant and achievement of a minimum score on the nursing assistant competency examination.

The nursing assistant competency examination has two parts: (1) a two-hour written test with fifty multiple-choice questions written in English; and (2) a manual skills evaluation that requires the applicant to perform five randomly-selected nursing assistant skills. An oral examination must be administered as a substitute for the written portion of the examination upon an applicant's request.

## Standardized Curriculum for the Nursing Assistant Training Program

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The standardized curriculum for the certified nursing assistant training program is established in rule 64B9-15.006, F.A.C. It requires a minimum of 80 hours of classroom and 40 hours clinical instruction. The Certified Nursing Assistant Examination consists of a written exam and a clinical skills test.

## Florida Board of Nursing Approval of Nursing Programs

Professional nursing (RN) or practical nursing (LPN) licensure applicants must graduate from an approved nursing program as a prerequisite to being allowed to sit for the nursing licensure examination. Under part I, ch. 464, F.S., the Florida Board of Nursing must adopt rules regarding educational objectives, faculty qualifications, curriculum quidelines, administrative procedures, and clinical training necessary to ensure that approved nursing programs graduate nurses capable of competent practice.

Chapter 2002-230, L.O.F., modified the provisions governing approval of nursing programs by the Florida Board of Nursing. The law exempts from certain board administrative rules, any nursing program that maintains accreditation through a nursing accrediting body recognized by the United States Department of Education, if the program maintains a student pass rate on the National Clinical Licensure Exam (NCLEX) of not less than ten percentage points below the national average pass rate as reported annually by the National Council of State Boards of Nursing (NCSBN).

### **Articulation of Nursing Education Program Career Paths**

Florida has an articulation agreement for health education programs that permits a student to learn in modules from the basic health sciences course in high school, to bachelor's degree programs. The articulation among health education programs in Florida is designed to ensure that a student's (and in many cases, the state's) investment of time and money at one level of education can provide a building block to the next education program when the health care worker is ready to move up to the next level of skill and knowledge. The CNA standards are the basis for the LPN standards. The high school core also articulates into LPN and associate degree in nursing (ADN) programs. Most community colleges have a "bridge" program for LPN to RN. Universities are required to accept and speed the progress of registered nurses who hold an AS degree and want to get their BS in nursing. Under AS to BS articulation, a university must accept the AS degree as a block of designated nursing courses and may not, for instance, decide not to give credit for a course or accept some courses as electives rather than as credits toward the nursing degree.

## **Workforce Initiative to Train Nurses--Nurses Now**

The Agency for Workforce Innovation has received a federal Workforce Investment Act Section 171 special demonstration project grant of \$2 million to provide training to address the critical statewide need for Licensed Practical Nurses, Registered Nurses, and nursing instructors. "Nurses Now" is a partnership between the Agency for Workforce Innovation (AWI), the Florida Department of Education. Division of Community Colleges, and Division of Workforce Education, the Department of Health, and the nurse education and training community. AWI will serve as the lead agency and liaison with the 24 Regional Workforce Development Boards. The Department of Education will be the liaison with the state university system, community colleges and public secondary and post secondary school system nursing education and training programs.

## Limited Funding of the Nursing Student Loan Forgiveness Program to Encourage Nursing Education

The Nursing Student Loan Forgiveness Program (NSLFP) assists eligible Licensed Practical Nurses (LPNs), Registered Nurses (RNs) and Advanced Registered Nurse Practitioners (ARNPs), by making an annual payment, to the principle only, of outstanding student loans incurred toward a nursing education.

According to the Department of Health there are currently 2,460 nurses on the Nursing Student Loan Forgiveness Program (NSLFP) waiting list. According to the Department of Health, the program is unable to process the applications for those on the waiting list because it does not have funding to

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enroll any new additional nurses into the program. There are currently 273 nurses enrolled in the NSLFP.

Facilities where nurses may work in order to be eligible to participate in the NSLFP are: state-operated medical facilities; public schools: Department of Health (DOH) county health departments: community/migrant health centers; teaching hospitals, as defined in s. 408.07, F.S.; family practice teaching hospitals, as defined in s. 395.805, F.S.; specialty children's hospitals, as described in s. 409.9119, F.S.; and other licensed hospitals, licensed nursing homes and licensed birth centers. According to the Department of Health, the Medical Education Reimbursement and Loan Repayment Program has not been funded since FY 1993-94.

### Clara Ramsey

Clara Ramsey worked as an aide to Jacksonville area lawmakers for 13 years. She was attentive to the concerns of the constituents who called on their senator for assistance. In the months preceding her untimely death in an automobile accident on February 23, 2003, Mrs. Ramsey was working on the geriatric nursing proposal that is created in this bill.

### C. SECTION DIRECTORY:

- Section 1. Cites the bill as the "Clara Ramsey Care of the Elderly Act." The act is named for Clara Ramsey, a long-time Legislative aide who worked on the development of this geriatric nursing initiative.
- **Section 2.** Creates the Certified Geriatric Specialist Preparation Pilot Program for delivery of geriatric nursing education to CNAs who wish to become certified geriatric specialists.
- Section 3. Creates the Certified Geriatric Specialty Nursing Initiative Steering Committee to guide the implementation of the pilot program.
- Section 4. Requires AWI to conduct or contract for an evaluation of the pilot program in consultation with the steering committee.
- Section 5. Requires AWI to submit annual status reports and recommendations regarding the pilot program.
- Section 6. Creates s. 464.0125, F.S., to provide definitions and responsibilities for certified geriatric specialists.
- Section 7. Amends s. 381.00315, F.S., to authorize the temporary reactivation of the inactive certification of a certified geriatric specialist in the event of a public health emergency.
- Section 8. Amends s. 400.021, F.S., to add certified geriatric specialists to the individuals who may render certain nursing services in a nursing home to elderly patients.
- **Section 9.** Amends s. 400.211, F.S., to permit the employment in a nursing home of a certified geriatric specialist as a CNA, just as a registered nurse or practical nurse may be employed as a CNA.
- Section 10. Amends s. 400.23(3), F.S., to authorize the inclusion of certified geriatric specialists as nursing staff in the computation of nursing staffing minimums in a nursing home.
- Section 11. Amends s. 409.908(2), F.S., to include certified geriatric specialists in the direct care subcomponent when patient costs are calculated for nursing home reimbursement by the Medicaid program.
- Section 12. Amends s. 458.303(2), F.S., to permit certified geriatric specialists to practice under the direct supervision of a licensed physician.

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Section 13. Amends s. 1009.65, F.S., to make certified geriatric specialists eligible for participation in the Medical Education Reimbursement and Loan Repayment Program, up to \$4,000 per year.

Section 14. Amends s. 1009.66(2), F.S., to make certified geriatric specialists eligible for participation in the Nursing Student Loan Forgiveness Program.

**Section 15.** Provides an appropriation of \$157,017 from the General Revenue Fund to AWI to support implementation of the pilot program.

Section 16. Amends s. 464.201, F.S., to provide a definition for the "practice of a certified nursing assistant."

Section 17. Amends s. 464.202, F.S., to authorize the Board of Nursing to adopt rules regarding the scope of practice and level of supervision of certified nursing assistants.

**Section 18.** Provides an effective date of upon becoming a law.

### II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

### A. FISCAL IMPACT ON STATE GOVERNMENT:

### 1. Revenues:

Application fee for registration as a certified geriatric specialist

Total Estimated Revenue: FY 2004-05

\$4,000

The Department of Health's estimate for FY 2004-05 assumes 40 certified geriatric specialists would be licensed.

### 2. Expenditures:

FISCAL IMPACT ON THE AGENCY FOR WORKFORCE INNOVATION:	FY 2003-04	FY 2004-05	FY 2005-06
	Amount/FTE	Amount/FTE	Amount/FTE
Program Manager Data Processing Fringe Benefits (35%) Indirect Costs (15.51%)	\$6,360	\$6,360	\$6,360
	\$1,000	\$1,000	\$1,000
	\$2,576	\$2,576	\$2,576
	\$1,541	\$1,541	\$1,541
Staff Travel 2 trips /month x 2 people x 400mi @ \$.29 x 12 months	\$5,560	\$5,560	\$5,560
Contracted Services for reporting, coordination, correlation site visits and evaluation:	\$72,500	\$72,500	\$72,500
	1 FTE	1 FTE	1 FTE
Tuition, Books, Fees, Medicals and Training Supplies: 24 participants per Program Site @ \$2,000 per year	\$48,000	\$96,000	\$48,000

Travel Expenses for Steering

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Committee Meetings			
4 trips x 6 persons x \$350 airfare	\$ 8,400		
4 trips x 6 persons x 50 (per diem) x 2 days	\$ 2,400		
4 trips x 6 persons x \$30 x 2 days (car)	\$ 4,440		
4 trips x 2 nights lodging@ \$80 x 6 persons	\$ 3,840		
Annual total	\$19,080	\$19,080	\$19.080
Duplication/Printing of Annual			
Reports / Final Evaluation	\$ 400	\$ 400	\$ 400
Total Annual Cost:	\$157,017	\$205,017	\$159,537
FISCAL IMPACT ON THE DEPARTMENT OF HEALTH:		FY 2004-05	FY 2005-06
		Amount/FTE	Amount/FTE
Non-Recurring:			
EXPENSE: Standard Expense Package		\$2,603	
OCO: Standard OCO Package		\$2,000	
Total Non-Recurring		\$4,603	
Recurring and Annualized Continuation Effect	ets:		
Salaries/Benefits: Regulatory Specialist I		\$42,230	\$42,230
EXPENSES: Standard Expense Package		\$ 5,416	\$ 5,416
Total Recurring Costs		\$47,646	\$47,646
Total of Estimated Non-recurring & Recurring Expenses		\$52,249	\$47,646

According to DOH, one Regulatory Specialist I, pay grade 15, would be required starting in year 2. DOH used the annual mid-point for pay band 3 to establish recurring salary and benefits. According to DOH, there may be other indeterminate costs associated with implementing this program such as modifying PRAES (the Medical Quality Assurance practitioner data base), printing forms, etc.

### B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

### D. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The statute allows a maximum fee of \$1,000.00 fee to have a nursing course of study approved by the Board of Nursing. Private schools also have to pay additional fees to the commission

## E. FISCAL COMMENTS:

The Department of Health has expressed concerns that the bill makes certified geriatric specialists eligible for The Nursing Student Loan Forgiveness Program (NSLFP) but does require them to contribute funding to maintain the trust fund. The department is concerned that funding is already limited and not available to everyone who is eligible.

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The department has also expressed concerns that the cap on the application fee, that is not to exceed \$100, and the cap on the biennial renewal fee, that is not to exceed \$50, are too low to fund administration of the program. The department estimates administration of the new licensure category to cost \$99,895 over a two year licensure cycle. This must come from the Medical Quality Assurance Trust Fund which is supported by licensure fees. The Department of Health points out that the bill provides for certified geriatric specialists to be included in the Medical Education and Loan Repayment Program (s. 1009.65, F.S.) but that nursing homes are not eligible sites for the program.

#### III. COMMENTS

### A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or to take an action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenues.

2. Other:

None.

### **B. RULE-MAKING AUTHORITY:**

The Board of Nursing is authorized to adopt rules regarding the practice and supervision of certified nursing assistants.

## C. DRAFTING ISSUES OR OTHER COMMENTS:

It is not clear if "agency in line 80 refer to AWI or to AHCA.

Line 100 includes a reference to a licensed practical nurse curriculum in s. 464.019, F.S., however, that section does not specify a licensed practical nurse curriculum.

The definition of "certified geriatric specialist seems to include substantive requirements and limits which exceed the scope of a definition and might be best moved to another section.

### IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES

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